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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Barve for Congress 426 Palmspring Drive ADDRESS (number and street) (Check if address is changed) Gaithersburg 20878 MD CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS kumarbarve@gmail.com (Check if address is changed) Optional Second E-Mail Address sethemaiman@aol.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.kumarbarve.com (Check if address is changed) DATE 25 2015 C00574731 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Paul Benkert Jr. Type or Print Name of Treasurer Paul Benkert Jr. [Electronically Filed] 03 25 2015 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100